Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>02/22/2010</u>	Address:	<u>4871 N. US 31</u>
Case #:	42F30139		COLUMBUS, IN
County:	BARTHOLOMEW		<u>47203</u>
Operation Chemic	aboratory Seizure (check one) onal Lab al/Glassware/Equipment (only) te (only)	Seizure Location (compared Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): <u>UPSTAIRS</u> , <u>DOWNSTAIRS</u>			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Solvents: OUTBUILDING, TRASH			
Water Reactive Metal (Lithium): EXPOSED & INTACT			
Anhydrous Ammonia: CYLINDERS IN STRUCTURE			
Corrosive Acid: MURATIC, SULFERIC			
Corrosive Base: <u>REACTIONS</u>			
☑ Other (item and location): <u>OUTBUILDING</u>			
Child under age 18 discovered (check one) ☐ Yes (number present) ☐ No *If yes, fax report to Child Protective Services		Investigative Information ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☐ Other: NEIGHBORHOOD REPORT	
This report is to be faxed to the following agencies that serve the location:			
Health Dep	ment: COLUMBUS F.D. eartment: B,C,H,D, ection Service:	Fax: <u>E-MAIL</u> Fax: <u>E-MAIL</u> Fax:	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: CHIP AYERS Phone 317.234.4591			

- ** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- *** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.